## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 100204030-1

As a below nam d inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name:

		and colo inventor life		•		
I believe I am the origin joint inventor (if plural patent is sought on the Aut matically Configure	names a inventio	are listed below) of the n entitled:	e subject matter whi	ich is claimed	and for which a	
the specification of wh			•			
( ) was filed on	( ) was filed on as US Application No. or PCT International Application					
Number	Number and was amended on (if applicable).					
I hereby state that I hincluding the claims, a disclose all information	s amend	led by any amendmen	t(s) referred to abov	e. I acknowle		
Foreign Application(s) and/or	Claim of F	oreign Priority				
I hereby claim foreign priori inventor(s) certificate listed I a filing date before that of the	below and	have also identified below a	any foreign application for			
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119		
				YES:	NO:	
	. 1			. YES:	NO:	
Provisional Application			<u> </u>	<u> </u>		
I hereby claim the benefit u below:	nder Title	35, United States Code Sec	ction 119(e) of any United	I States provisiona	l application(s) listed	
		APPLICATION NUMBER	FILING DATE			
U. S. Priority Claim I hereby claim the benefit u			<del></del>	<del></del>		
manner provided by the firs information as defined in Tit application and the national APPLICATION NUMBER	le 37, Code or PCT inte	e of Federal Regulations, Se	ection 1.56(a) which occur application:		ling date of the prior	
		· · · · · · · · · · · · · · · · · · ·				
			<u> </u>			
POWER OF ATTORNEY: As a named inventor, I held business in the Patent and T			) and/or agent(s) to pros	ecute this applica	tion and transact all	
Customer Number		022879	Place Customer Number Ber Code Label here			
Send Correspondence to			Direct Telepho	ne Calls To:		
HEWLETT-PACKARD CO			James R. McD	aniel		
P.O. Box 272400			208 396 4095			
Fort Collins, Colorado 8	0527-2400	0	200 330 4030	•		
I hereby declare that a made on information a with the knowledge_ imprisonment, or both false statements may j	and beli that wil , under	ef are believed to be Iful_false_statements_ Section 1001 of Title	true; and further the and the like so ma 18 of the United Sta	at these statem ade_are_punish ates Code and	nents were made nable_by_fine_or that such willful	
Full Name of Inventor: Rol	ert Dou	glas Christiansen	Citizenship: U	s		
Residence: 4!	586 N. C	hapala, Boise, ID 837	13			
Post Office Address: Se	em as R	desidence	<del></del>			
The part & hour	$\sim$	/\ // / A	1 //	<b>471.</b> _		
Myentor & Signature	plas	Christian	an July	81h, 2003	<u> </u>	